Effective October 1, 2001									19/8	<u> </u>	153	9_
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY	
TC	TAL CLAIMS						RA	TE	FEE	1	RATE	FEE
FO	R		NUMBER	NUMBER FILED		BER EXTRA	BASI	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS				nus 20=	· +	* #		9=		OR	X\$18=	
INDEPENDENT CLAIMS			L	inus 2=		<u> </u>	X4	2=		OR	X84=	
MU	LTIPLE DEPEN	NDENT CLAIM PI	RESENT				+14	0=		OR	+280=	
* If	the difference	in column 1 is	less than ze	less than zero, enter "0" in column 2				ΓAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column						(Column 3)	SM/	ALL	ENTITY	OR	OTHER SMALL E	
AMENDMENT (CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA	re	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NO	Total	. 19	Minus	# 5	33	•	X\$	9=		OR	X\$18=	
AME	Independent	· 3	Minus	***	5	= —	X42			OR	X84=	
سا	FIRST PRESE	ENTATION OF MI	JLTIPLE DEF	PNUEN	CLAIN		+14	0=		OR	+280=	
İ							TO ADDIT.	OTAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)					•					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA	RA ⁻	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	** ,		3	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	- CL AINA	-	X42	<u>}=</u>		OR	X84=	
	FIRST PRESE	NIATION OF MI	JLIIPLE DEF	JLTIPLE DEPENDENT		CLAIM		0=		OR	+280=	
							TO ADDIT.	TAL FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2) (Colu			, w			, .	10011.7 22.	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	-
AME	Independent	*	Minus	***	C: AISA]=	X42	=		OR	X84=	
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=									OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OB L	TOTAL	
""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20. ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box										, ~	ADDIT. FEE L	
•	the riighest Notin	idel Previously Fai	3 FOR (10tal or	Hospenoe	#N) 15 016	mgnest nomber ,	Outo in	e ohb	TOPHATE UVA	. 111 CO10	MID: 1,	

PATENT APPLICATION FEE DETERMINATION RECORD

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Application or Docket Number